



**LIVING YOUNG**  
CENTER FOR HEALTH & ANTI-AGING

## **How to Prepare for your Appointment**

### **Dermal Fillers / Lipo Dissolve / Pellet Insertion**

- To minimize bruising, be sure to avoid alcohol for 24 hours prior to your appointment.
- Stop taking any blood thinners for one week, including: NSAIDS (Ibuprofen, Aspirin, Naproxen Sodium), fish oil, and any vitamins beginning with a "G".



## Post Pellet Insertion Instructions

- Your insertion site has been covered with two layers of bandages:
  - Remove the outer pressure bandage any time after 24 hours. Pink or bloody discoloration of the outer bandage is normal.
  - The inner layer should be removed after 3-5 days.
- The sodium bicarbonate in the anesthetic may cause the site to swell for 1-3 days.
- You may experience bruising, swelling and/or redness of the insertion site which can last from a few days up to 2-3 weeks. The insertion site may be uncomfortable for 2-3 weeks.
- We recommend putting an ice pack on the insertion area off and on over the next 4-5 days. Do not leave an ice pack on longer than 20 minutes at a time.
- If there is itching or redness you may take Benadryl 50mg orally every 6 hours. This may cause drowsiness. You may also try Zyrtec or Claritin during the day if preferred.
- If you experience bleeding from the incision site- apply firm pressure for 5 minutes.
- PLEASE CALL if you have bleeding not relieved with pressure, oozing, or any puss coming out of the insertion site.

### DO NOT:

- Do not take a tub bath or get into a hot tub or swimming pool for 3 days.
- Do not scrub the area in the shower until the incision is fully healed- about 7 days.
- Do not do any major exercises for 3 days; running, elliptical, squats, lunges, etc.

### Reminders:

- Remember to go to your pre-scheduled appointment for post insertion blood work six weeks after your insertion.
- Re-insertion is needed every 3-4 months for women, and every 4-5 months for men.

**I acknowledge that I received a copy and understand the instructions on this form.**

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Print Name

Signature

Date